ENTRY BLANK—PLEASE TYPE OR PRINT ☐ Ms./Artist Permanent Street Daytime Tel. ( Zip Temporary or Studio Address Street City Daytime Tel. ( Zip area If you do not presently live in one of the counties of the Western Reserve, in which county where you born?\_ Collaborator (if any) \_ If May Show entries are not accepted or are not sold: Artist will pick up at Museum. ☐ Museum should dispose of. ☐ Museum should ship to artist at artist's expense: Street WALL PIECEZIP City Special Instructions Entry Blank must be completed in full and signed; forms received unsigned will not be accepted. When necessary, include instructions or a drawing for assembling and displaying an object. Note carefully the dates for both delivery and return of objects. It is understood that the Museum shall dispose for its own account any objects not picked up by the dates given herein. It is also understood that accepted objects will remain on exhibition until May 31, 1987. The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed herein. I have received the unsold/unaccepted object(s) in good condition.

1987 MAY SHOW The Cleveland Museum of Art Cleveland, Ohio 44106



Mm. S	LOTT R.	DOMES	
356 h	CHERRY	ST.	
Address City & State	, OH	44240 Zip	

□ Paintings

☐ Graphics ☐ Photography

	Sculpture Crafts - Commo					
Title 11 Post	m.F.A1	165.01	N THE C	ouch"		
DO NO	OT WRITE IN THIS	SECTION	ACCEPTED	NOT ACCEPTED		
				×		
Paintings ☐ Graphics ☐ Photography ☐ Sculpture ☐ Crafts ☐ Crafts						
Title						
"VIEW From my Couch AND-OR BEYOND"						
DO NOT WRITE IN THIS SECTION			ACCEPTED	NOT ACCEPTED		
		ū	X			

Return of Objects Not Accepted: April 14–18 Accepted: June 9–13

Do Not Detach